

**UMDNJ Physician Assistant Program
Instructions for Applying**

Application Deadline: June 1, 2009

These instructions contain three sections:

- I. Instructions For Completing Your Application
- II. Mailing Your Application / Deadline For Applying
- III. Important Facts for Applicants

Read each section *carefully*. Failure to follow instructions will delay or prevent the processing of your application.

I. INSTRUCTIONS FOR COMPLETING YOUR APPLICATION

Each of the underscored documents below can be sent *together* in your application packet. Those documents *not underscored* may be sent separately. Follow each format *carefully*.

A. APPLICATION FORM

1. **Type or print** all information.
2. Indicate any name(s) you have previously used, such as a maiden name (No. 2).
3. Under No. 12,
 - a. include **only** the high school from which you graduated;
 - b. list **all** schools you attended after high school, even if you did so for **less than one semester**;
 - c. put the **most recent school first**.**NOTE: Your application will be delayed if you do not enter all schools.**
4. If you list that you have been trained in EMS, you must provide proof of same.
5. Be sure **your name is on every page**, including any supplements that you attach.

B. \$50 APPLICATION FEE. Make check or money order payable to **UMDNJ - SHRP** in the amount of **\$50.00**. This payment is *non-refundable*.

C. QUESTIONNAIRE. **Type or print** your answer on a separate sheet of paper and list them consecutively. Use **no more than one-half page** for each question. Use extra pages as necessary and write your name on each added page.

D. THREE (3) LETTERS OF RECOMMENDATION in SEALED, SIGNED ENVELOPES

1. You **must use** the enclosed Recommendation Forms. (Letters from a Credentials Committee **cannot** be used in place of the forms.)
2. A letter of recommendation that is not accompanied by a Recommendation Form **CANNOT** be substituted.
3. Complete Section I of each form. Be sure to **sign the waiver** before sending it to the person to complete.
4. To ensure that the Recommendation Form is filled out correctly and to avoid any delay of your application, please tear off the sections on the attached sheet (Instructions for Recommendation Writer) and submit along with the Recommendation Form to the recommendation writer.
5. **DO NOT OPEN THE ENVELOPE. THIS WILL INVALIDATE THE RECOMMENDATION.**

E. TRANSCRIPTS

All transcripts **must be OFFICIAL**. Copies are **not acceptable**. (**NOTE:** If a school refuses to mail your transcript directly to you, **do not call this office**. Request that it be mailed to the PA Program [see Section II] and clip a note to the front of your application listing which transcripts are being mailed separately.)

1. SAT Scores

Submit SAT scores with your application, if you have taken them. Our institution's code is **2829**.

2. College, University, and Professional School Transcripts

A transcript from **EVERY college, university, and professional school that you attended after high school must be submitted, even if:**

- a. the credits you earned at one school appear on the transcript of another school.
- b. you attended a school for **only one semester**.
- c. you withdrew from the school before completing a semester.
- d. you took only one (1) course, which you completed, withdrew from, or failed.
- e. the credits you took were not relevant to any particular course of study.

Note: If you completed a prerequisite course required for our program under a different title than what was outlined in our brochure, or received Advanced Placement (AP) credits or have taken a CLEP exam, please forward a course description or AP/CLEP documentation along with your application. Please note that the CLEP code for our institution is 2145.

The above transcripts must remain in the original sealed envelope from the school or institution. **DO NOT OPEN THE ENVELOPE. THIS WILL INVALIDATE YOUR APPLICATION.**

3. Updated Transcripts

If you are presently taking courses, send your application now and arrange for updated transcripts to be sent **as soon as possible** after your course work is complete. **The applicant is responsible for sending updated transcripts when they become available.**

4. Foreign Transcripts (Evaluations and Translations)

- a. All transcripts from colleges outside the United States **must be evaluated** by a recognized transcript evaluation agency. **Translations alone will not be accepted.** We recommend the following agency:
International Education Evaluations, Inc.
5030 Flagstone Court, Harrisburg, NC 28075
Tel. #: 704-455-6154 Fax: 704-455-6155
- b. Evaluations (for colleges and Pre-Med courses taken in 11th and 12th Higher Secondary Education) must be **course by course**, including credits and grades.
- c. Only **official evaluations** (i.e., original copies on the agency's letterhead in a sealed envelope) are acceptable.
- d. If a foreign transcript is written in a language other than English, a **certified English translation** must also be submitted to this office by the applicant. (**NOTE:** A "certified translation" is an original copy printed on the letterhead of the evaluating agency.)
- e. Transcript evaluations should be sent directly to us by the evaluating service. It is the responsibility of the applicant to follow up with this office to see that they have been received.
- f. Those applicants who graduated outside of the United States are required to take the TOEFL Exam. A score of 100 (IB), 250 (CB) and 600 (PB) must be achieved. **Our institution's code for this exam is 2391.**

F. NOTIFICATION VIA EMAIL REGARDING OUTSTANDING DOCUMENTS

If you wish to be notified of any missing documents, you **must include an email address**. Approximately 1-2 weeks after receipt of your application, you will receive an email telling you that your application is complete or what documents, if any, are missing. This will be the **only notification** sent to you as to whether or not your application is complete. After this initial notice is sent, it will be your responsibility to follow up regarding receipt of your documents. **(NOTE: If you do not include an email address, you will not be notified of any missing documents.)**

II. MAILING YOUR APPLICATION / DEADLINE FOR APPLYING

ALL APPLICATIONS and SUPPORTING DOCUMENTS MUST BE POSTMARKED NO LATER THAN JUNE 1, 2009. Mail all the above underscored documents - use the checklist below! - ***together*** to the following address:

PHYSICIAN ASSISTANT PROGRAM
Robert Wood Johnson Medical School
 675 Hoes Lane
 Piscataway, NJ 08854-5635

III. IMPORTANT FACTS FOR APPLICANTS

- A. **Once your application is complete and has been reviewed**, one of the following will occur:
1. you will be invited to attend an in-person interview;
 2. you will be placed on hold until more applications are reviewed; or
 3. a letter of rejection will be mailed to you.
- B. **Financial Aid.** Inquiries about financial aid should be directed to the UMDNJ Financial Aid office at 732-235-4689.
- C. **Questions?** If you have any questions, please contact the Physician Assistant Program (732-235-4445).

REMEMBER: INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED FOR ADMISSION.

CHECKLIST. *Did you include in your packet:*

- Completed application form? Is it signed?
- Plus any supplements? Is your name on ***every page?***
- Check or money order for **\$50?** Is it made out to **UMDNJ - SHRP?**
- Completed questionnaire?
- All three (3) recommendation forms? Is each form in an envelope with signature across the seal?
- A transcript from ***every school*** you attended after high school? Are they ***official?***
- Your email address?

For Your Records: Enter date you mailed your application _____, and **keep these instructions** for future reference.